## **Application Number** 10/563,466 **CHANGE OF** Filing Date January 4, 2006 **CORRESPONDENCE ADDRESS** Moshe Ben-Ayun First Named Inventor Application Art Unit Address to: **Examiner Name** Commissioner for Patents P.O. Box 1450 8259 Confirmation Number Alexandria, VA 22313-1450 Attorney Docket Number CM06000EI Please change the Correspondence Address for the above-identified application to: | X | The address associated with Customer Number 24273 OR Firm or Individual Motorola, Inc. Name Address 8000 West Sunrise Boulevard Address Law Department - MD 1610 Plantation City State Florida Zip 33322 United States Country Telephone 954-723-6449 Fax 954-723-3871 This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor. Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number: Registered practitioner named in the application transmittal letter in an Application without an executed oath or declaration. See 37 CFR 1.33 (a)(1). Registration Number Signature /Randi L.Karpinia/ Randi L. Karpinia Typed or Printed Name Date November 16, 2006 Telephone 954-723-6449 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*. \*Total of Χ 1 forms are submitted.